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CONFIRMATION NO. 4870

<b>SERIAL NUMBER</b> 10/808,538	<b>FILING OR 371(c) DATE</b> 03/25/2004 <b>RULE</b>	<b>CLASS</b> 536	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> 78258.329329	
<b>APPLICANTS</b> Shui-on Leung, Madison, NJ; Michele J. Losman, South Orange, NJ; Hans Hansen, Mystic Island, NJ;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/155,106 11/17/1998 PAT 6,730,300 which is a 371 of PCT/US97/04696 03/19/1997 and claims benefit of 60/013,708 03/20/1996 <i>pbm</i> <i>6/28/06</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/13/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>pbm</i> <i>pbm</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 35657					
<b>TITLE</b> Humanization of an anti-carcinoembryonic antigen anti-idiotypic antibody as a tumor vaccine and for targeting applications					
<b>FILING FEE RECEIVED</b> 1008	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		